

Departmental Training Evaluation Form



INNARCHIVE
Hospitality Library

Session: (e.g. Wine – Grape Varieties)

Trainer: (Your name)

Date:

How useful is the information you learned? Please circle your rating:

Poor



Great



Outcome/Content

1 2 3 4 5

Outcome/Content

1 2 3 4 5

Outcome/Content

1 2 3 4 5

Outcome/Content

1 2 3 4 5

Outcome/Content

1 2 3 4 5

Outcome/Content

1 2 3 4 5

Do you feel the trainer:



Followed a logical order

1 2 3 4 5

Knew the topic well

1 2 3 4 5

Was professional

1 2 3 4 5

Was enthusiastic and helpful

1 2 3 4 5

General Comments:

Please give this page to the trainer – thank you!